PATENT APPLICATION FEE DETERMINATION RECORD									Application or Docket Number			
Effective December 8, 2004 10/545755												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY				
U.S. NATIONAL STAGE FEES			(Colomir 1)		, · · · ·		]	RATE	FEE		RATE	FEE
			SUAL SAT - CHO			SE ENT - 1 200	1	BASIC FEE	أواكم صوا	ΛP	BASIC FEE	
BASIC FEE			SMALL ENT. = \$ 150 Satisfies PCT Article 33(1)-		All other situations =			ļ	200		<b></b>	
EXAMINATION FEE			(4) = \$50/\$100		\$ 100 / \$ 200			EXAM, FEE	100		EXAM. FEE	
SEARCH FEE			U.S. is ISA = \$ 50 / \$ 100 ALL other countries = \$ 200 / \$ 400		All other situations = \$ 250 / \$ 500			SEARCH FEE	2000		SEARCH FEE	
FEE FOR EXTRA SPEC. PGS.			minus 100 =		./ 50 =			X \$ 125 =			X \$ 250 =	
TOTAL CHARGEABLE CLAIMS					•			X \$ 25 =		OR	X \$ 50 =	
INDEPENDENT CLAIMS				minus 3 =				X \$ 100 =		OR	X \$ 200 =	
MUL	TIPLE DEPEN	DENT CLAIM PRE	SENT	1			1	+ \$ 180 =		OR	+ \$ 360 =	
If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2		TOTAL Z	150°	OR	TOTAL	
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)								SMALL E	NTITY	OR	OTHER SMALL E	
AMENOMENT A		CLAIMS REMAINING AFTER AMENDMENT	·	1	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	<b>—</b>		=		X \$ 25 =		OR	X \$ 50 =	
	Independent	•	Minus			=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MUL			LTIPLE DEPENDENT C				+ \$ 180 =		OR	+ \$ 360 =	
								TOTAL ADDIT.		ÓR	TOTAL ADDIT.	
-												
(Column 1) (Column 2) (Column 3)												ADDI-
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE
	Total	•	Minus	•• .		= .		X \$ 25 =		OR	X \$ 50 =	
MEND	Independent	•	Minus	•••		=		X \$ 100 =		OR	X \$ 200 =	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT			CLAIM			+\$180.=		OR	+ \$ 360 =		
								TOTAL ADDIT.		OR	TOTAL ADDIT.	
	•			••								
**	if the "Highest Nu	mn 1 is less than the mber Previously Pak	d FOC IN T	HIS SPACE IS les	is than 2	0', enter "20".						
-	If the "Highest No	mber Previously Paid ther Previously Paid	d For IN T	HIS SPACE IS IN	s than 3	', enter "3".	d lin th	ne appropriate bo	x in column 1.		·	

FORM PTO-875 (Rev. 02/2006)

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